

SERVICE NAVIGATION GUIDE

REGION 4

Kent County

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REGION 4 OFFENDER SUCCESS Service Provider Contact Information

Angie Sprank Community Coordinator Phone: (616) 902-5994 Email: prccsprank@gmail.com	Shelly Keene Grants and Contract Manager Phone: (231) 660-0285 Email: Skeene@michworkswc.org
Glennes Page Resource Navigator Phone: (616) 902-3311 Email: CentralMPRINavigator@gmail.com	Brigette Reed Finance Director Phone: (231) 660-0274 Email: Breed@michworkswc.org
Alternative Directions Phone: (616) 245-4346 Resource Navigators embedded in Kent County Parole Office Goodwill Industries of Greater Grand Rapids Sophia Ordway Employment Specialist Phone: (616) 522-2128 Email: lbenes@goodwillgr.org	Hope Network - Employment Mary Scott Career Development Service Mgr. Phone: (616)726-1873 Email: HNWFD OS@hopenetwork.org
WorkSolved Joshua Degi and Kara Fratto Employment Specialist Kara- (616) 828-7422 kara.fratto@worksolved.com Joshua- (616)828-2161 joshua.degi@worksolved.com REGION 4 OFFE	ENDER SUCCESS

REGION 4 OFFENDER SUCCESS Designated Email Address

OSKent@Michworkswc.org

REGION 4 OFFENDER SUCCESS

"Who does What?"

In-Reach	Housing	Employment	Support Services	Vouchers
In Parole Office: Community Coordinator Resource Specialist	Alternative Directions Resource Specialist	Hope Network Goodwill Industries	Alternative Directions Resource Specialist	Alternative Directions Resource Specialist
		WorkSolved		

REGION 4 OFFENDER SUCCESS Mentoring Services – Clear Program

Grand Rapids Police Department Mentoring – CLEAR Program

Dan Myers-Men's Group Phone: (616) 456-4181

Email: dmyers@grand-rapids.mi.us

Ruth Walters-Woman's Group Phone: (616) 446-9934

Email: rwalters@grand-rapids.mi.us

REGION 4 OFFENDER SUCCESS Health and Behavior Health Service Providers

Catholic Charities West Michigan CBT and Batterer's Intervention

Emily Jones

Phone: 231-720-5661

Email: ejones@ccwestmi.org

REGION 4 OFFENDER SUCCESS Housing Service Providers - Landlords

Alternative Directions 1706 S. Division, Grand Rapids Phone: (616) 245-4346 Email: nsynowicz@altdir.org	Matthew's House 750 Alpine, Grand Rapids Phone: (773)-440-1678 Reginald
Sheila Shang 1906 Linden St SE or 1041 Thomas SE, Grand Rapids Phone: (616) 375-6076 Shelia.shang0@gmail.com	House of Blessing Shellie Cole-Mickens Phone: (616) 634-1972 Email: shelliec123@yahoo.com
United Methodist Community House Phone: (616) 452-3226 Email: Pearsontiff@umchousegr.onmicrosoft.com	Housing Choice Voucher Program Contact your Resource Navigator

OFFENDER SUCCESS SERVICE ELIGIBILITY:

Offender Success Services are available to the following type of offenders when resources are not available in the community to meet the need as identified in the COMPAS/TAP:

- Paroled Sex Offenders
- Parolees with a MEDIUM or HIGH COMPAS Violence or Recidivism
- SAI Parolees

Exception Approval –Parolees and SAI Probationers with a COMPAS LOW/LOW that do not meet the above criteria are eligible to receive services with approval from the Parole Supervisor and Regional Manager.

CFJ – CREATING THE REFERRAL:

Parole agents and staff shall create OS referrals and CFJ-140 forms in OMNI:

Referrals for Services

Select the appropriate vendor(s) and create referrals in Contract Management/Offender Referral Maintenance as follows:

<u>Create the referral(s)</u> – In OMNI, Contract Management - Offender Referral Maintenance - Offender Referral Tab:

• Select appropriate Vendor, Program Type and Service Type

<u>Create the CFJ-140</u> – The Offender Referral/Enrollment/Termination forms (CFJ-140) shall be completed in OMNI, Reports - Program Assignment Reports.

- Highlight the appropriate referral(s)
- Select "New"
- Review forms to ensure accurate information reflected.
- Save form as word document.

OMNI case notes should be promptly updated outlining the referral for services.

Referral Termination

Agents shall notify Region 4 Offender Success by designated email upon confirmation that services for the parolee is no longer necessary (i.e. alternative housing secured, discharge from supervision, issuance of warrant, temporarily placed into custody, etc.).

IN-REACH PROCESS:

Prior to the In-Reach

Resource Specialist Resource Navigator Contact designated Service Providers to confirm appointment date(s).

Prepare In-reach packet for each participant.

Agent

Review parolee file(s) and the following to determine needs that shall be discussed during the In-Reach session:

- Parole date
- Home placement
- COMPAS/TAP
- Medical/Mental
- Identification Needs
- Support Services
- Transportation from facility to parole office

Participate in the In-Reach as scheduled.

During the In-Reach

While the development of the offender's case plan is the ultimate goal of the session, the initiation and building of the relationship between the offender and agent is equally important.

Facilitation of In-Reach Meeting:

The following should occur during the meeting as applicable:

- Introduction of Agent
- Brief explanation of the purpose and intent of the In-Reach meeting
- Discussion of approved home placement
- Vital documents (i.e. Birth Certificate, State Identification, social security card, etc.)
- Address previous/pending entitlements (i.e. Social Security income, Veteran Affairs)

- Discuss medical/psychological concerns and medications (30 days' supply)
- Discuss prisoner's education/employment history and plans while on parole
- Review of the COMPAS/NAS/TAP and address any additional needs of the prisoner
- Inform prisoner of scheduled program referrals and services
- Discussion of special conditions (i.e. Sex offender registration, GPS/EMS, School Safety Zones, No contact conditions, parole board referred residential placement, PSN, etc.)
- Discuss what steps can be taken to ensure success during the current parole term
- Provide an opportunity for the prisoner to ask questions and discuss his/her parole plan
- Agent provides release day reporting instructions and confirm transportation to parole office

Following the In-Reach

Agent Documents in case notes when the In-Reach was conducted.

Enter appropriate/updated Goals/Tasks/Activities into TAP.

Send CFJ-140 for services to **OSKent@michworkswc.org**

Resource Specialist Completes In-Reach Summary

Sends Summary to designated Offender Success email, with cc: agent

Prepare Resource Packet for day of release for each participant.

Facility Release Date

After the initial reporting with assigned agent, the parolee will attend a scheduled appointment for resource navigation with the Resource Specialist/Navigator. The parolee will obtain the designated support services recommended by the agent through the completed CFJ-140.

Referral Process for Offender Success Services:

RESIDENTIAL STABILITY:

Housing Commercial Placement

Request for commercial placement should be initiated during the pre-parole investigation and prior to inreach with parolees in need of housing assistance. Staff shall document in case notes all efforts to secure alternative housing in the community prior to submitting request for community placement.

The agent must request commercial placement and email the following information to **OSKent@Michiganworkswc.org** email addresses.

Agent Email

Subject Line Housing - MDOC# - Parolee Name - Kent

Ex. Housing - #12345 Smith, John – Kent

Email Content Date Housing Needed

Sex Offender Designation: Yes or No

CFJ-140

Program Name: Michigan Works! West Central
 Program Type: Shelter/Residential/Housing
 Service Type: Housing Assistance/Payments

HOUSING EXTENSION

Agents are to review each case in need of an extension, at minimum, seven (7) days prior to commercial placement expiration date and forward the following information. Supervisor approval is required for extensions more than (90) days and Regional Manager Approval is required for extensions in excess of (180) days in housing:

Agent Email:

Subject Line Ext Housing - MDOC# - Parolee Name - County

Ex. Ext Housing - #12345 Smith, John – Kent

^{*}OMNI case notes and TAP should be updated detailing the commercial housing placement.

^{*}Parolees commercially housed must also be referred for employment services, unless there is strong indication and verification that the parolee has employment, or has Social Security Disability Income. If the parolee indicated <u>application</u> for Social Security Disability (SSI or SSD), please complete referral process.

AIR MATTRESS

Due to varying commercial placements, it may be necessary to procure an air mattress in the place of the bed option. A CFJ-140 must be completed for procurement.

BEDDING

Due to varying commercial placements, it may be necessary to procure specific bedding. A CFJ-140 must be completed for procurement.

In addition to referring for commercial placement, the CFJ-140 must include:

CFJ-140

• Program Name: Michigan Works! West Central

• Program Type: General Support Services

• Service Type: Household

The Resource Specialist/Navigator will provide the items at the time of the navigation appointment. The Resource Specialist/Navigator must have the parolee complete the *Signature of Receipt* form for the item(s) upon receipt. The form must be returned for the service reconciliation process.

HOUSING RULES AND RESPONSIBLITIES

Each parolee who is commercially housed must read and sign the *Rules and Responsibilities* form. This form outlines the rules and expectations of those residing in commercial placements. It also designates a contact person to whom personal property may be given, in the event that property is left. The approved contact person will have five (5) days to collect belongings before items are discarded.

HOUSING NAVIGATION

Resource Specialist/Navigators are required to complete a Housing Navigation meeting within the first month - (30) days of commercial placement. Completion of a housing plan will require communication between the Resource Specialist/Navigators, Parole Agent, and Parolee. The Resource Specialist/Navigators will notify Parole Agent of initial plan, and will continue develop the housing plan collaboratively. The Resource Specialist/Navigators will continue to meet with parolee as needed to assist with continued housing plan while in commercial placement.

Referral Termination

Agents shall notify Region 4 Offender Success by designated email upon confirmation that services for the parolee is no longer necessary (i.e. alternative housing secured, discharge from supervision, issuance of warrant, temporarily placed into custody, etc.).

A Region 4 Offender Success representative will send out a weekly housing report to the Parole Supervisor to confirm correct information relative to current placements.

HEALTH AND BEHAVIOR HEALTH - COG:

COGNITIVE BEHAVIORAL PROGRAMMING

Agents are to forward CFJ-140 to **OSKent@michworkswc.org** email address.

Agent Email

Subject Line COG: MDOC# Parolee Name - Kent

Email Content Reason service is needed

CFJ-140

Program Name: Michigan Works! West Central
Program Type: Mental Health/Counseling
Service Type: Cognitive Restructuring

• Comments: Reason for referral

Service Provider: Notify agent of the parolee's program enrollment date.

Referral Termination

Agents shall notify Region 4 Offender Success by designated email upon confirmation that services for the parolee is no longer necessary (i.e. discharge from supervision, issuance of warrant, temporarily placed into custody, etc.).

JOB PLACEMENT:

EMPLOYMENT SERVICES

Agents are to forward CFJ-140 to **OSKent@michworkswc.org**. All parolees housed in commercial placement must also have a referral for employment services.

The Employment Specialist offers a range of services. These services are tailored to the individual's needs. These services include Job Readiness Services and Job Development Services.

Job Readiness includes developing a resume, completing job applications, addressing criminal record, practice interviews, soft skills, and budgeting.

Job Development includes referral to employers, applying for employment, contact/advocacy with employers, encouragement of job retention, and continued follow-up with employer and employee.

Agent Email

Subject Line EMPLOYMENT: MDOC# Parolee Name - Kent

Email Content Date of parole and reason for (specific) service goals, if necessary.

CFJ-140

• Program Name: Michigan Works! West Central

• Program Type: Employment

• Service Type: Employment Counseling

Job Placement

Service Provider: Notify agent of the parolee's initial appointment date.

Referral Termination

Agents shall notify Region 4 Offender Success by designated email upon confirmation that services for the parolee is no longer necessary (i.e. discharge from supervision, issuance of warrant, temporarily placed into custody, etc.).

SOCIAL SUPPORT:

<u>PUBLIC TRANSPORTATION – Bus Pass or Tokens</u>

Transportation assistance is available for parolees for business/purposeful travel. (i.e. home placement on release date, entitlements and vital document appointments, job search activities, employment relates purposes, cognitive behavioral programs, substance abuse treatment, mental and physical healthcare appointments, etc.).

Due to unforeseen events, and if necessary, the parolee will be given a one-way bus pass to the navigation meeting with the Resource Specialist/Navigator at Exodus Place from the inventory provided to the parole office by the Resource Specialist/Navigator.

Parole Supervisor or designee: Manage the inventory of bus passes or token, and distribution to

parole agents within office as needed.

Manage the Transportation Inventory Log for the office.

Resource Specialist/Navigator: Provide approved bus passes or tokens to the requesting Parole

Supervisor, or designee.

Reconcile the Transportation Log on a monthly basis for accurate

accounting of documented distribution/inventory. Requisition purchase of bus passes or tokens as needed.

Agent:

Agents are to forward CFJ-140 to: **OSKent@michworkswc.org**

Ensure the *Transportation Inventory Log* for the service is signed by

parolee.

Agent Email

Subject Line Transportation: MDOC# Parolee Name - Kent

CFJ-140

Program Name: Michigan Works! West Central

• Program Type: General Support Services

• Service Type: Public Transportation

The Resource Specialist/Navigator will provide the long-term bus pass or tokens at the time of the navigation appointment. The Resource Specialist/Navigator must have the parolee complete the *Signature of Receipt* form for the item(s) upon receipt. The form must be returned for the service reconciliation process.

*If required, parolee must return Commercial Transportation Log for previously used bus pass or tokens, prior to receiving additional transportation services.

TRANSPORTATION - Gas Card

Assistance is available for parolees for business/purposeful travel (i.e. home placement on release date, entitlements and vital document appointments, job search activities, employment relates purposes, cognitive behavioral programs, substance abuse treatment, mental and physical healthcare appointments, etc.).

Agent:

Agents are to forward CFJ-140 to: **OSKent@michworkswc.org**

Agent Email

Subject Line Transportation: MDOC# Parolee Name - Kent

CFJ-140

Program Name: Michigan Works! West CentralProgram Type: General Support Services

• Service Type: Other Transportation

The Resource Specialist/Navigator will provide the gas card at the time of the navigation appointment. The Resource Specialist/Navigator must have the parolee complete the *Signature of Receipt* form for the Gas Card upon receipt. The form must be returned for the service reconciliation process.

*Parolee must return Transportation Log of previously used Gas Cards, prior to receiving additional transportation services.

CLOTHING – Vouchers

This voucher is for clothing only. Clothing purchased shall only be for the parolee. Children's clothing is not allowed. The participant can receive up to two (2) *Clothing Vouchers* at \$25.00 each. Any additional vouchers requested must be approved by Parole Supervisor.

Agent:

Agents are to forward CFJ-140 to: **OSK**6

OSKent@michworkswc.org

Agent Email

Subject Line CLOTHING: MDOC# Parolee Name - Kent

CFJ-140

• Program Name: Michigan Works! West Central

• Program Type: General Support Services

• Service Type: Clothing

Resource Specialist/Navigator: Receive CFJ, then complete Voucher

Provide Voucher to parolee.

Complete service reconciliation process.

HOUSEHOLD – Vouchers

This voucher is for necessary household provisions only. This includes kitchen utensils, alarm clocks, linens, etc. This does not include electronics such as televisions, radios, videos, video games, etc. The participant can receive up to two (2) *Household Vouchers* at \$25.00 each. Any additional vouchers requested must be approved by Parole Supervisor.

Agent:

Agents are to forward CFJ-140 to: **OSKent@michworkswc.org**

Agent Email

Subject Line CLOTHING: MDOC# Parolee Name - Kent

CFJ-140

Program Name: Michigan Works! West CentralProgram Type: General Support Services

• Service Type: Household

Resource Specialist/Navigator: Receive CFJ, then complete Voucher

Provide Voucher to parolee.

Complete service reconciliation process.

FOOD BOX or HYGIENE KITS

Food Box:

This box is prepared as a gap measure for those who are commercially housed, and do not have immediate access to local Food Pantry services. Each box contains food provision for approximately three days, and hygiene provisions for one month. This should allow enough time to complete the DHHS benefits application process, and/or referrals to local food pantries. **Not all counties have this particular service, unless requested by supervisor.**

Hygiene Kits:

This kit is prepared for male and female populations. It contains the basic hygiene items: soap, shampoo, razors, tooth paste, toothbrush, deodorant, comb, and small amount of laundry detergent. **Not all counties have this particular service, unless requested by supervisor.**

Agent:

Agents are to forward CFJ-140 to: **OSKent@michworkswc.org**

Agent Email

Subject Line FOOD or HYGIENE: MDOC# Parolee Name - Kent

CFJ-140

Program Name: Michigan Works! West CentralProgram Type: General Support Services

• Service Type: Food/Hygiene

The Resource Specialist/Navigator will provide the Food Box <u>OR</u> Hygiene Kit at the time of the navigation appointment. The Resource Specialist/Navigator must have the parolee complete the *Signature of Receipt* form for the Food Box OR Hygiene Kit upon receipt. The form must be returned for the service reconciliation process.

Resource Specialist/Navigator: Provide and maintain a continual supply of boxes and kits.

Reconcile boxes and kits on a monthly basis for accurate accounting

of documented distribution/inventory.

Requisition purchase of boxes and kits as needed.

IDENTIFICATION

Agents are to forward CFJ-140 to: **OSKent@michworkswc.org**

Agent Email

Subject Line IDENTIFICATION: MDOC# Parolee Name - Kent

Email Content Specify what type of identification is needed.

ex. Birth certificate, State I.D.

CFJ-140

• Program Name: Michigan Works! West Central

• Program Type: General Support Services

• Service Type: Identification

WORK RELATED CLOTHING OR TOOLS

Agents are to forward CFJ-140 to **OSKent@michworkswc.org** email address.

Agent:

The Employer must provide to the parolee, *a letter on company letterhead* specifically stating what clothing or tools are required. The letter <u>must</u> specifically state the clothing or tool requirement. ex. *John Doe must have black non-skid sole shoes, a black belt, and black dress pants*.

The request must be of reasonable or minimal cost.

This letter must be submitted as an attachment to the requesting email in addition to the CFJ.

The request must be approved by the Community Coordinator.

Agent Email

Subject Line

WORK ITEMS: MDOC# Parolee Name - Kent

CFJ-140

• Program Name: Michigan Works! West Central

 Program Type: Employment
 Service Type: Work Clothing Work Tools

Attachment:

Employer letter

Employment Specialist:

Receive CFJ and Employer letter

Obtain approval of Community Coordinator

Follow procurement procedure – reasonable/minimal cost If clothing can be purchased through voucher, contact Resource

Specialist/Navigator at Exodus Place.

Complete Signature of Receipt form for items.

Complete service reconciliation process.

MULTIPLE SERVICES REQUIRED

In the event there are many services that are necessary and requested. It is appropriate to place all necessary services on one CFJ-140. Agents are to forward CFJ-140 to **OSKent@michworkswc.org** email address.

All services listed on the CFJ must be necessary. It is requested that the Agent does not complete a blanketed CFJ for any and all services.

Agent Email

Subject Line SERVICES: MDOC# Parolee Name - Kent